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IMPORTANT FAX DOCUMENT

September 7, 2006

NAMB Examiner Avi Gold

COMPANY U.S. Patent and Trademark Office - Group Art Unit 2157

YOUR REP NO. 09/702,094

FAX NUMBER 571-273-8300

FROM Jason Jackson

OUR REFERENCE NO. 04159.0001U3

OUR PAX NUMBER 678-420-9301

NUMBER OF PAGES 8

Please see attached:

1. Transmittal Letter (2 pages)

2. Notice of Appeal (2 pages)

3. Request for Extension of Time (2 pages)

4. A credit card Form PTO-2038 in the amount of \$760.00 (1 page)

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ATTORNEY DOCKET NO. 04159.0001U3 **PATENT**

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In re Applica	ition of)			SCP 07	2006	
Friedman, et al.)) A	art Unit: 2157				
Application No. 09/702,094) E	Examiner: Avi M.	Gold			
Filing Date:	October	30, 2000	0	j (Confirmation No.	7881			
	O-INTELI VAGER"	LIGENT	TRAFFIC)				•	
			TRANSMITT	AL LETTE	<u>er</u>				
Mail Stop A Commission P.O. Box 14: Alexandria,	er for Paten 50	ıts	ts.		E & ROSENBERO Tr Number 23859	G, P.C.			
Alexandria,	VM 22313-	1430		Septemb	September 7, 2006				
Sir:									
Trans	smittal here	with is/a	re the following	in the above	-identified applica	ation:			
Fee a No A	e of Appea s calculated dditional F exted Drawi	l below ce Requi	ired		Petition to Extend Time Supplemental Declaration Terminal Disclaimer Other				
			CLAIMS AS AI	MENDED			7		
_	CLAIMS REN AFTER AMEN		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE			
Total Claims					X \$50.00	\$0.00	1		
Independent Claims					X \$200.00	\$0.00	1		
First Presentation of a Multiple Dependent Clair			•		+ \$360.00	\$0.00]		
EXTENSION FEB	1 st Month \$120	2 nd Mor \$450	\$1020	4 th Month \$1590	5 th Month \$2160	\$1020.00			
Reduction by ½ for filing by SMALL ENTITY (Note 37 C.F.R. §1.9, §1.27, §1.28) -							1		
TOTAL FEE DUE						\$510.00			

ATTORNEY DOCKET NO. 04159.0001U3 APPLICATION NO. 09/702,094

Payment:							
	A check in the amount of \$ is enclosed.						
	Payment by credit card in the amount of \$760.00 for the fees designated below. (Form PTO-2038 enclosed). WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
	The Commissioner is authorized to charge our Deposit Account No. 14-0629 in the amount of \$ to cover the above-listed additional fees. A duplicate copy of this transmittal is enclosed.						
	In the event of an overpayment or improper payment of a required fee, the Commissioner is authorized to charge or credit our Deposit Account No. 14-0629 as required to correct the error.						
	NEEDLE & ROSENBERG, P.C.						
	Jason S. Jackson Registration No. 56,733						
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CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 C.F.R. § 1.8							
I hereby certify that this correspondence, including any items indicated as attached or included, is being transmitted via facsimile transmission to: Examiner Avi Gold, Art Whit 2157, 571-273-8300, on the date indicated below.							
E-Kauliii	11.41 - 917/06						
Monick	Date:						